

REVIEW

In connection with procedure for academic position of an "Associate Professor" in scientific specialty "Forensic Psychiatry", Department of Psychiatry and Medical Psychology, MU-Varna; Contest announced in State Gazette, Issue 99 of 26.11.2021.

Author: Acad. Prof. Dr. DROZDSTOY STOYANOV STOYANOV, MD, DSc, MU-Plovdiv, Head of Department of Psychiatry and Medical Psychology, announced in State Gazette, 14 / 18.02.2022

By order No. P-109-158 / 14.04.2022 of the Rector of MU-Varna, I was appointed a member of the Scientific Jury in the above competition, and on the basis of Minutes No. 1 / 03.05.2022 from a meeting of the Scientific Jury I have been elected as a reviewer.

One candidate participates in the competition - Dr. Adelina Boyanovna Djordjanova, Ph.D.

1. Brief biographical data and career development of the candidate

Born in 1961. Graduated in Medicine at the Medical University of Varna in 1995 and acquired a degree in psychiatry at the same university in 2005; forensic psychiatry, 2011.

She worked consecutively at the Ravna Hospital and the Karvuna Hospital, and psychiatrist and forensic psychiatrist at the Sveta Marina Hospital. After a competition, since 2017 he has held the academic position of Head Assistant. In 2016, the candidate defended dissertation for the acquisition of PhD degree on the problems of forensic psychiatric and forensic psychological examinations in civil law.

Dr. A. Djordjanova regularly participates in the teaching process with students and is involved as researcher on a research project with a budget of BGN 50,000 under the internal research fund for MU Varna.

2. Quantitative indicators

The candidate participates in the competition with a total number of scientific publications = 12, of which one independent monograph (habilitation thesis), a chapter in a textbook, 4 articles and 5 reports in non-indexed publications. Dr. Djordjanova has participated in a number of scientific forums.

According to an academic record for the author, her contributions have been cited 11 times, outside the Web of Science system. In connection with the procedure for PhD degree there are reported 4 publications in non-indexed journals and collections, and under the procedure for "Head Assistant" - 13. The academic transcript also includes two papers in press in editions indexed in Scopus / Web of Science, the status of which at the time of review has not been determined.

In summary, it can be concluded that the minimum quantitative criteria set out in the Regulations for the application of the Law in Medical University "Prof. Dr. Paraskev Stoyanov "- Varna to borrow AD" Associate Professor", have been fulfilled.

3. Quality indicators

According to the presented report of scientific contributions, they are concentrated in the monograph or habilitation thesis and can be summarized as follows.

The monographic work has a volume of 333 pages, illustrated with 18 figures. The literature used includes 156 sources.

Structurally, the monograph includes a preface, introduction and three chapters, conclusion, bibliography. Seven illustrative expert statements with court decisions are described.

While the problems of criminal responsibility in their essence have long been clarified long ago, those of legal capacity and incapacity are insufficiently developed not only in Bulgarian but in foreign forensic psychiatric literature as well.

The problem of the exact criteria in recent years is also raised in the foreign literature concerning the expert assessment of behavior. The reasons given are the intensification of socio-economic relations, the growing prevalence of mental disorders in old age / due to prolonged life expectancy, and in some countries due to the demographic collapse, e.g. in the Republic of Bulgaria / and modern knowledge of neurobiology. Some authors emphasize the need to formulate precise criteria, despite differences in legal doctrines. In a number of countries, the assessment of legal incapacity is primarily a subject of forensic psychology.

Mental disorders can completely or partially exclude the ability to work, when as a result of the disease the ability to "take care of one's affairs" is contested. The universal formula "taking care of one's own affairs" in more detail includes the freedom to form one's own will. Its violation in the case of mental illness or underdevelopment (mental illness or dementia) means that the individual is unable to recognize the meaning of his will or can not act according to this knowledge, or as is often stated in the legal literature, can not be driven by reasonable motives or its decision does not depend on reasonable arguments.

In the forensic psychiatric examination of legal capacity, it is crucial to determine the severity of the syndrome, the degree to which the loss of adequate experience for oneself and relationships with others occurs. The assessment of these conditions so far is based only on clinical and empirical knowledge, without clear criteria that should be applied in the specific assessment of borderline conditions - between capacity and limited capacity or between limited or total incapacity.

This raises the fundamental problem of the relationship between neuroscience and the definition of criteria for moral and legal responsibility (*St Stoyanov, D. (2018). Psychiatry and neurolaw. Balkan Journal of Philosophy, 10 (1)*).

The first chapter of the habilitation thesis presents the historical overview of the emergence and development of legislation related to legal capacity in the context of mental illness in civil law. For the first time all dissertations on forensic psychiatric topics of Bulgarian psychiatrists and forensic psychiatrists have been described to this day.

The main legal categories of legal capacity, and incapacity, full and limited incapacity are considered. A commentary was made on the legal categories of criminal responsibility and legal capacity, with an emphasis on incomplete research and interpretations of legal capacity.

Forensic psychiatric expertise in civil proceedings is represented by its procedural organization and tasks. The different types of expertise that are used in civil proceedings are presented. An attempt has been made to clarify the differences in the conclusions of the same evidence by individual experts. The most common reasons for giving different expert opinions when assessing the capacity / incapacity of different experts are pointed out: lack of clear clinical criteria for incapacity for work in some of the mental disorders; incorrect application of the legal distinction; lack of sufficient data on the medical condition in the past and at the time of the forensic psychiatric examination; differences in diagnosis. Wrong conclusions of experts can lead to undesirable consequences. If the interests of the incapacitated patient are protected by his guardian, then the mentally ill person, erroneously recognized as capable, can harm his own interests and those of his relatives.

The second chapter "Practical and applied problems in some aspects of modern civil law" presents the problems of individual examinations - the ability to act under guardianship, in transactions and contracts, probate, divorce and mental

fitness to exercise parental rights, as well as expertise under the State and Municipal Liability for Damages Act. Included from my practice as an expert are forensic psychiatric, complex and forensic psychiatric and forensic psychological examinations, which are prepared together with other experts. Judgments handed down by the Court are also presented.

The third chapter "Contemporary Civil Law - Past, Present and Perspectives" contains the author's own research. For a period of five years, 327 forensic psychiatric, forensic psychological and complex examinations were examined with subsequent court decisions issued by the District Court - Varna. In order to achieve the research goals, the expert statements were studied and a statistical analysis of the data of the evaluated subjects and the court decisions was carried out. The structures of forensic psychiatric, forensic psychological, complex examinations are analyzed. In addition, socio-demographic data, information on the presence of mental disorders, family history, comorbidity with other mental, somatic, neurological and other disorders, as well as information on the most commonly applied laws in civil proceedings and the tasks assigned to experts are collected. . Data on the incapacity of the evaluated subjects and the most frequently used medical criteria for proving the incapacity in civil proceedings were collected.

In the study, the data on the structure of the first part of the forensic psychiatric examination (FPE), which was appointed by the court for the first time, outline that 60.60% of the examinations were prepared without omissions. In the others there are omissions and inaccuracies in the various elements of the information regarding.

Expertise appointed by the court after the first FPE was assigned to 33 persons, in whom in 81.80% of cases the first part was filled in correctly, and in the rest there are gaps in the primary information - regarding the certified and the appointing authority.

The comparative analysis between the first parts of the first, second and third expertise shows that there is a significant difference in the quality of the provided or undescribed information ($p < 0.05$), as with each subsequent appointed expertise the percentage of omissions decreases.

The comparative analysis of the information submitted by the experts in the second part of the SPE shows a significant difference between the individual FPEs ($p < 0.05$). -Many omissions.

Insufficient anamnestic data and the absence of a psychiatric interview have the highest relative share in the third part of the initially appointed FPE (66.30%). In 63.90% of the examinations no interviews were described. The psychiatric interview is the main tool of the psychiatric examination.

In the second FPE the relative share of expertise without errors in this part is higher than in the first FPE, by 40.70%, and it is mainly noted that no interviews are described in the part for expert research (22.70%).

The comparative analysis of the information in the third part of the examinations shows a difference in the relative shares between the statements without and those with gaps ($p < 0.05$).

There is reported a trend towards increase the relative share of expertise without gaps after each subsequent appointed statement.

The fourth part of the FPE is a Discussion, which is comprehensive and covers all sources. In the study, the first-appointed SPE is characterized by a relatively high proportion of omissions, with most problems observed in the absence of information on clinical symptoms and syndromes that make up the diagnosis, expert commentary and analysis of case data (60.20%).

The results of the study show that only 27 out of 327 examined expert statements were prepared according to the criteria of the Ordinance for preparation of forensic psychiatric examinations.

Most omissions are registered in the second, third and fourth part of the expertise (64 FPE), which are related to the nature of the expertise. Insufficient anamnesis data and the absence of a psychiatric interview have the highest relative share in the third part of the first-appointed FPE (66.30%). In 63.90% of the examinations there are no described interviews. The psychiatric interview is the main tool of the psychiatric examination. The interview is a purposeful consistent series of questions and search for specific answers (research scales) that cover all aspects of psychopathology (60).

In second place in terms of the number of omissions in one expertise is the merging of the second, third, fourth and fifth parts (49 FPE), which in turn raises the question of whether the respective FPEs set a reasonable ground for the respective court decision.

Most concerns are related to the diagnoses in the examinations, delivered according to ICD-9 (31.80%), although in the Republic of Bulgaria in 1992 the first edition of the International Classification of Diseases - X revision was published. ICD-10) and official documents should be delivered based on the current classification.

Of the examined FPEs, 180 (55.00%) found concerns of different nature, and in some of the FPEs more than one concern was registered.

The results of the study demonstrate that in regards to the criteria of Ordinance № 2 of October 26, 2011 only 27 out of 327 analyzed examinations were performed accordingly, which leads to the conclusion that it is necessary to prepare and adopt a Standard of the structure of forensic psychiatric examination, in order to enhance the quality of expert statements.

In Bulgaria, the lack of clear clinical criteria for incapacity for work in individual mental illnesses often leads to incorrect forensic psychiatric conclusions, on which the further fate of the persons concerned may depend.

Once again this comes to emphasize the central role of neuroscience evidence in determining the criteria for moral and legal responsibility in psychiatry (*St Stoyanov, D. (2018). Psychiatry and neurolaw. Balkan Journal of Philosophy, 10 (1).*

CONCLUSION

Based on the above review of the candidate's contributions, it may be concluded that she meets the normative quantitative and qualitative requirements of the Medical University "Prof. Dr. Paraskev Stoyanov" - Varna for academic position of "Associate Professor" in this field. In that respect, I give my positive assessment and propose to the esteemed scientific jury to vote in the affirmative for the academic position of "Associate Professor" by Adelina Boyanovna Djordjanova.

June 10, 2022

REVIEWER:

A handwritten signature in blue ink, appearing to be 'D. Stoyanov', written over the 'REVIEWER:' label.

(Academician Prof. Dr. Drozdstoy St. Stoyanov, MD, MD)